



FH
[REDACTED]

STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of

[REDACTED]

DECISION

MAC/143365

PRELIMINARY RECITALS

Pursuant to a petition filed August 23, 2012, under Wis. Stat. § 49.497(1m)(a), to review a decision by the Kenosha County Human Service Department in regard to Medical Assistance, a hearing was held on October 10, 2012, at Kenosha, Wisconsin.

No issue remains for determination by the Division of Hearings and Appeals.

There appeared at that time and place the following persons:

PARTIES IN INTEREST:

Petitioner:

[REDACTED]

Respondent:

Department of Health Services
1 West Wilson Street
Madison, Wisconsin 53703

By: Karen Mayer

Kenosha County Human Service Department
8600 Sheridan Road
Kenosha, WI 53143

ADMINISTRATIVE LAW JUDGE:

David D. Fleming
Division of Hearings and Appeals

FINDINGS OF FACT

1. Petitioner (CARES # [REDACTED]) is a resident of Kenosha County.
2. Petitioner was represented at the hearing by her husband, AO.
3. The Kenosha County Human Service Department sent Petitioner a notice dated December 2, 2011 that informed her that she had been overissued health care benefits in the amount of \$274.17. The notice was sent to 4710 21st Avenue in Kenosha. This was not the correct address

at the time as Petitioner filed another appeal with the Division of Hearings and Appeals on November 30, 2011 and the address at that time was 1404 16th Avenue in Kenosha. See Division of Hearings and Appeals case # FOP/137072.

4. Dunning notices dated January 3, 2012, February 2, 2012 and March 2, 2012. These were sent to Petitioner at 1404 16th Avenue in Kenosha.
5. Petitioner was sent a Notice of Administrative Action and an Order to Compel Payment of Liability, both dated August 17, 2012, that informed Petitioner that she must pay the \$274.17 within 30 days or a circuit court judgment would be entered against her.
6. Petitioner has not repaid any of the overpayment involved here.
7. The only appeal filed here was filed on August 23, 2012.
8. The \$274.17 overissuance of benefits involved here occurred during the period of July 1, 2010 through September 30, 2010 and came about because income earned by Petitioner's husband, AO, during that calendar quarter was not reported to the agency and would have disqualified the adults in the household from receipt of benefits though the children remained eligible. The \$274.17 represents a balance due after some adjustments for excess premium payments.

DISCUSSION

There are some notice issues here but it is not necessary to decide them as once the circumstances of the overissuance of health care benefits was explained at the hearing, Petitioner's husband indicated that he understood the overpayment of benefits and would make arrangements to pay it. This leaves no issue for resolution by the Division of Hearings and Appeals. If I misunderstand the circumstances, Petitioner should note the rehearing instructions below.

CONCLUSIONS OF LAW

That no issue remains for determination by the Division of Hearings and Appeals.

THEREFORE, it is

ORDERED

That this appeal is dismissed.

REQUEST FOR A REHEARING

This is a final administrative decision. If you think this decision is based on a serious mistake in the facts or the law, you may request a rehearing. You may also ask for a rehearing if you have found new evidence which would change the decision. Your request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and tell why you did not have it at your first hearing. If you do not explain these things, your request will have to be denied.

To ask for a rehearing, send a written request to the Division of Hearings and Appeals, P.O. Box 7875, Madison, WI 53707-7875. Send a copy of your request to the other people named in this decision as "PARTIES IN INTEREST." Your request for a rehearing must be received no later than 20 days after the date of the decision. Late requests cannot be granted.

The process for asking for a rehearing is in Wis. Stat. § 227.49. A copy of the statutes can be found at your local library or courthouse.

APPEAL TO COURT

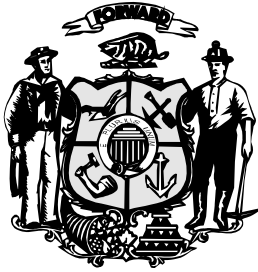
You may also appeal this decision to Circuit Court in the county where you live. Appeals must be served and filed with the appropriate court no more than 30 days after the date of this hearing decision (or 30 days after a denial of rehearing, if you ask for one).

For purposes of appeal to circuit court, the Respondent in this matter is the Department of Health Services. After filing the appeal with the appropriate court, it must be served on the Secretary of that Department, either personally or by certified mail. The address of the Department is: 1 West Wilson Street, Madison, Wisconsin 53703. A copy should also be sent to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400.

The appeal must also be served on the other "PARTIES IN INTEREST" named in this decision. The process for appeals to the Circuit Court is in Wis. Stat. §§ 227.52 and 227.53.

Given under my hand at the City of Milwaukee,
Wisconsin, this 13th day of November, 2012

David D. Fleming
Administrative Law Judge
Division of Hearings and Appeals



State of Wisconsin\DIVISION OF HEARINGS AND APPEALS

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The preceding decision was sent to the following parties on November 13, 2012.

Kenosha County Human Service Department
Public Assistance Collection Unit
Division of Health Care Access and Accountability